

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Computer Readable Form (CRF)?::	No
Title::	DISPOSABLE SURGICAL SUCTION/IRRIGATION TRUMPET VALVE TUBE CASSETTE
Attorney Docket Number::	050251-0153
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	6
Total Drawing Sheets::	8
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Peter
Family Name::	Visconti
City of Residence::	Chicago

Country of Residence:: Illinois
Street of mailing address:: 4111 West Grace Street
City of mailing address:: Chicago
State or Province of mailing address:: IL
Postal or Zip Code of mailing address:: 60641

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas
Family Name:: Doering
City of Residence:: Grayslake
State or Province of Residence:: Illinois
Country of Residence:: US
Street of mailing address:: 440 Arlington Lane
City of mailing address:: Grayslake
State or Province of mailing address:: IL
Postal or Zip Code of mailing address:: 60030

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ken
Family Name:: Horton
City of Residence:: Kildeer

State or Province of Illinois
Residence::
Country of Residence:: US
Street of mailing address:: 22568 Ruth Court
City of mailing address:: Kildeer
State or Province of mailing address:: IL
Postal or Zip Code of mailing address:: 60047

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jan
Family Name:: Wells
City of Residence:: Sherrard
State or Province of Residence:: Illinois
Country of Residence:: US
Street of mailing address:: 2645 145th Avenue
City of mailing address:: Sherrard
State or Province of mailing address:: IL
Postal or Zip Code of mailing address:: 61281

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Family Name:: Thomas

City of Residence:: New Boston
State or Province of Residence:: New Hampshire
Country of Residence:: US
Street of mailing address:: 43 Weare Road
City of mailing address:: New Boston
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Family Name:: Hansen
City of Residence:: New Boston
State or Province of Residence:: New Hampshire
Country of Residence:: US
Street of mailing address:: 31 Briar Hill Road
City of mailing address:: New Boston
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Gary P.

Family Name:: Schroeder
City of Residence:: Londonderry
State or Province of Residence:: New Hampshire
Country of Residence:: US
Street of mailing address:: 24 Seasons Lane
City of mailing address:: Londonderry
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03053

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ashvin
Family Name:: Desai
City of Residence:: San Jose
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 4287 Littleworth Way
City of mailing address:: San Jose
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 95135

Correspondence Information

Correspondence Customer Number:: 27433

E-Mail address:: PTOMailChicago@Foley.com

Representative Information

Representative Customer Number::	27433	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/574,164	05/18/2000
09/574,164	Continuation-in-part of	09/492,964	01/28/2000
09/492,964	Continuation of	09/015,299	01/29/1998

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Allegiance Healthcare Corporation